

# **THE INTEGRATION OF EDUCABLE MENTALLY HANDICAPPED STUDENTS**

A study guide to the fourth program in the ACCESS television inservice series  
*ONE GIANT STEP: The Integration of Children With Special Needs*





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*ONE GIANT STEP: The Integration of Children With Special Needs* is a ten-program, inservice series of videotapes. Each videotape has a running time of 15:00 minutes and is supplemented by a study guide. The program order numbers and titles are:

- BPN 2154
- 01 Introduction
  - 02 The Integration of Dependent Handicapped Students
  - 03 The Integration of Trainable Mentally Handicapped Students
  - 04 The Integration of Educable Mentally Handicapped Students
  - 05 The Integration of Learning Disabled Students
  - 06 The Integration of Visually Impaired Students
  - 07 The Integration of Hearing Impaired Students
  - 08 The Integration of Physically Handicapped Students
  - 09 The Integration of Gifted Students
  - 10 The Integration of Behaviorally Disordered Students

(If you send a blank tape to the ACCESS NETWORK Media Resource Centre, there is no charge. If you prefer to buy tape from ACCESS, please send a purchase order to the Centre.)

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## PROGRAM SUMMARY

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This program presents a positive, yet sensitive, view of how educable mentally handicapped (EMH) students can be integrated into a regular school setting, as well as helped to function in their family and community environments.

Michael is shown functioning in a regular class with his grade four peers, where the educational program is modified to suit his needs. He goes to a special-education resource room for assistance in language arts skills.

Sherry, a junior-high student, is enrolled in a special-education class with integration in an optional subject such as typing. She fits into the community with support from her mother.

Other EMH students are taught life skills by their special-education teacher. The students become confident and learn independence. They are able to fit into the school and community environments.

## PROGRAM GOALS AND OBJECTIVES

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This program is designed to assist teachers, school administrators, parents, and others involved with the handicapped to gain background information on EMH students. It can be used as a base for effective integration of these students into the regular classroom environment.

As a result of inservice, participants will be able to:

1. define "educable mentally handicapped" and to identify the EMH student in terms of:
  - a. developmental characteristics,
  - b. socio-emotional characteristics,
  - c. learning characteristics.
2. identify the relevance of the Cascade Service Delivery Model in integrating EMH students.
3. describe at least four teaching techniques that can be used in teaching EMH students in an integrated setting.
4. list and describe, in general terms, resources, support services, and programs necessary to facilitate the education and integration of EMH students.

## BACKGROUND INFORMATION FOR THE TEACHER OR WORKSHOP LEADER

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The educable mentally handicapped student is usually significantly behind others at the same grade level in reading, arithmetic, and other academic subjects. It must be recognized that the rate of progress changes, with the result that this student falls further behind the peer group each year. The majority of EMH students, however, should be able to hold a job, manage their own affairs, and provide for themselves after leaving school.

## CHARACTERISTICS OF THE EDUCABLE MENTALLY HANDICAPPED STUDENT

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### 1. Developmental characteristics

- a. **Physical characteristics:** Physical appearance does not set EMH students apart from other children. In general, they are like average children in height, weight, and motor co-ordination.
- b. **Motor characteristics:** These students may display hyperactivity, distractibility, uninhibited behavior, poor co-ordination, and perceptual disorders. These are characteristic of students with learning disabilities and are often regarded as syndromes of brain damage. Students may perform well below their peers in motor proficiency, physical fitness, and fine-motor skills.
- c. **Speech and language characteristics:** Language and speech deficiencies often go unnoticed until in school. There are no particular patterns of speech impairment, but these students show a high rate of articulation disorder.

### 2. Socio-emotional characteristics:

EMH students may exhibit difficulty in personal and social behavior due to their intellectual limitations, learning problems, and history of academic failure. These characteristics often set



them apart from their peers in social judgment, socio-emotional maturity, and social status. Often they have a poor self-concept and are negative towards educational experiences, due to repeated failure. This results in an anticipation of failure in new situations.

Vocational success with EMH students is directly related to adequate interpersonal skills rather than their ability to carry out assigned tasks.

### **3. Learning characteristics:**

- a. EMH students have an intelligence quotient (I.Q.) of  $50 - 75 \pm 5$  on an individual test of intelligence.
- b. They are generally not ready for the usual school subjects (reading, writing, and arithmetic) at the age of six. They progress more slowly than their peers, e.g., they will not be able to cover the same amount of school work in a year.
- c. Their interests correspond more closely to that of children of their own mental age, e.g., a nine-year-old will enjoy play activities with six- and seven-year-olds.
- d. They have difficulty in learning meaningfully with rote materials, e.g., flash cards. They do better with concrete materials than with abstract aids.
- e. They must be trained in observation skills since they are not efficient in incidental learning.
- f. They retain information longer if it is meaningful. They remember facts and concepts that are spaced and reviewed over a period of time better than if taught in a specific block of time.
- g. These students often have a short attention span.
- h. They are often unable to generalize or transfer skills unless they are specifically taught, e.g., adding a column of figures may not be seen as also totalling a bank balance.
- i. Most EMH persons can do unskilled and skilled work at adult levels.

## **THE CASCADE SERVICE DELIVERY MODEL**

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In integrating an EMH student, the purpose is to provide as normal an educational experience as possible. This should take into account individual needs and the types of services available along a continuum of possibilities. This continuum ranges from segregated institutional settings to full-time placement in regular classrooms, with all the intermediate steps suggested in the Cascade Model (Figure 1). An elementary-age student, for example, may be enrolled in a regular classroom, but receive special assistance from a resource-room teacher. Farther down the model, a high school student may be enrolled in a special class, but be integrated in non-academic subjects with the peer group. Wherever the placement, the student must remain an integral part of the total school program while having educational needs met.

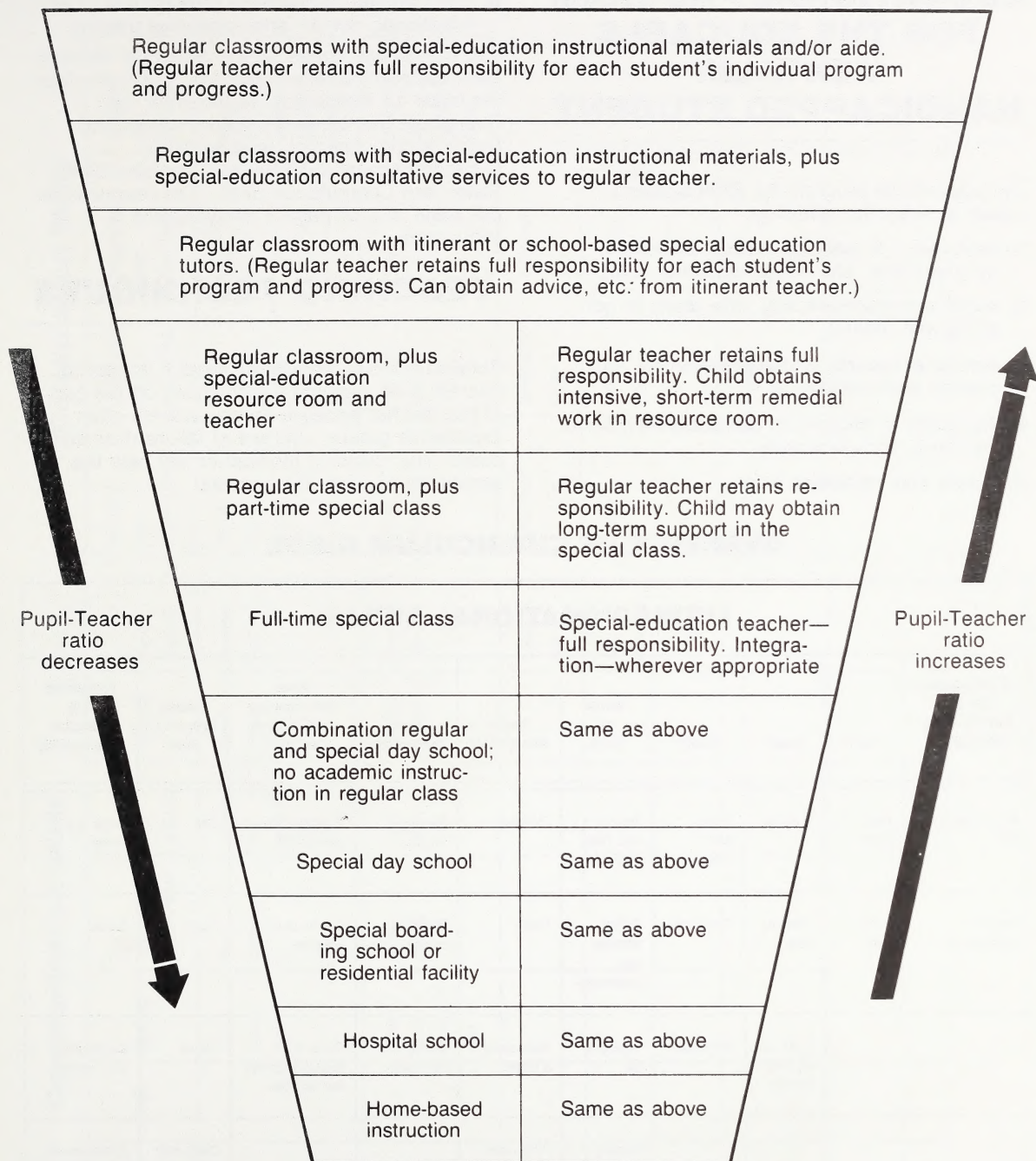
The integration of these students begins, as with any child, in the very earliest years of life. Integration is most readily achieved in the early years, when the discrepancies between these children and peers are less. They will begin with the peer group and go with them as far and as fast as possible.

Early identification of the EMH child, combined with support from the parents, allows the child to develop and adjust in a positive manner. The child who feels good about the successes achieved usually grows into a mature, independent individual.

Integration into any program should occur only after careful assessment of EMH students, the proposed school environment (building, student peers, staff, administrators), and the support services available. Inservice is a valuable tool in developing a positive, accepting attitude toward these students.



## CASCADE SERVICE DELIVERY MODEL \*



\* Adapted from the Reynolds framework (1962)<sup>1</sup>, the Dunn model (1963)<sup>2</sup>, and the Deno cascade model of special education services<sup>3</sup>

<sup>1</sup>Reynolds, Maynard C. "A Framework for Considering Some Issues in Special Education" in **Exceptional Children**, Vol. 28, No. 7, March 1962, p. 368.

<sup>2</sup>Dunn, Lloyd M., ed. **Exceptional Children in the Schools: Special Education in Transition**. New York: Holt, Rinehart, Winston, 1963, p. 37.

<sup>3</sup>Deno, Evelyn. "Special Education as Developmental Capital" in **Exceptional Children**, Vol. 37, No. 3, November, 1970, p. 235.

# EDUCATIONAL PROGRAM FOR THE EDUCABLE MENTALLY HANDICAPPED STUDENT

The educational program for EMH students should develop the following:

1. basic skills of reading, writing, arithmetic, language arts, and living/vocational skills;
2. social competencies, e.g., the ability to get along with others;
3. emotional security and independence, e.g., positive self-concept;
4. the ability to become an adequate member of the home and community;
5. leisure and recreation skills;

6. occupational competence through pre-vocational, career, and vocational training.

The *Curriculum Guide for the Educable Mentally Handicapped* (Alberta Education, 1982) provides the basis for instruction. Intended for use throughout this student's school career, the *Guide* is comprised of three sections: Living/Vocational (L/V) Skills; Communication Skills; and Computation Skills. The overview on this page and on page 5 shows topics of instruction.

## TEACHING TECHNIQUES

Suitable learning conditions require accepting, tolerant, and supportive techniques on the part of the teacher because these students often experience greater degrees of failure than their peers. The following techniques will help the teacher to program for success.

## OVERVIEW OF CURRICULUM GUIDE

### LIVING/VOCATIONAL SKILLS

Understanding Self and Getting Along With Others	Travel	Health	Safety	World of Work	Home Management	Money Management	Motor Development and Physical Activities	Leisure Recreation Skills	Citizenship and Individual Responsibility
Knowledge of self	Ways to travel	Nutrition	Home and school	Specific and allied work skills	Clothing	Earning money	Fundamentals of movement	Arts	Home and family
Social relationships	Travel skills	Personal care	Community	Career planning and awareness	Food	Spending money	Games and activities	Music	School
		Community health services	Recreation	Finding a job	Maintaining a home	Saving and borrowing	Social skills related to games and activities	Drama	Community and country
				Keeping a job	Child care			Crafts and hobbies	Environmental education
				Worker's rights					

## Communication Skills

SPEAKING	LISTENING	VIEWING	READING	VOCABULARY DEVELOPMENT	PRE- SPELLING	SPELLING	HAND WRITING
			Word analysis skills	Word recognition	Language and thinking skills	Phonetic analysis	Readiness skills
			Comprehension development	Word meaning	Visual motor skills	Structural analysis	Manuscript skills
							Cursive skills
							Self-expression and mechanics

## Computation Skills

NUMBERS AND NUMERATIONS	OPERATIONS AND PROPERTIES	MEASUREMENT AND GRAPHING	GEOMETRY AND SYMMETRY
Primitive number concept	Seriation addition concept	Money	Recognition and usage of geometric shapes
Cardinal numbers	Subtraction concept	Time	Construction of geometric shapes
Classification	Multiplication concept	Measurement	
Position	Division concept		
Fractions	Problem solving		



### 1. Structured Teaching

An activity is broken down into smaller steps or component parts using task analysis. This makes it easy to identify the prerequisite skills needed, and the sequential teaching steps involved, e.g., the simplified steps involved in planting a seed would be purchasing materials, putting soil in a pot, planting seed, and watering.

### 2. Integrated Approach

Learning becomes more meaningful by providing "hands-on" activities, whereby students manipulate, construct, and/or are actively involved with the learning material. Concepts are not taught in isolation but as part of some activity that can be related to several curriculum areas. For example, a field trip to the zoo can reinforce such skills as appropriate behavior (Understanding Self), purchasing (Money Management), and ecology (Citizenship).

### 3. Role Playing

This involves the student acting out the part of someone else, or being oneself in a real-life situation. By dramatizing a situation, students can better understand attitudes and human relations.

### 4. Modelling

In this approach, a behavior is demonstrated to the student by having someone do the task while he or she is watching (visual modelling), or speaking the correct response (auditory modelling) so that he or she can learn from imitation.

### 5. Behavior Modification

This approach focuses on bringing about change in specific, observable behavior. It presents a framework for developing strategies to increase student motivation and promoting self-managed behavior. It is based on the principle that behavior is changed by altering the consequences, outcomes, or rewards that follow the behavior, e.g., offering free time when assignments are done.

## RESOURCES, SUPPORT SERVICES, AND PROGRAMS FOR THE EMH

Three types of people provide support to the teaching-learning component within a school serving EMH students:

1. In-school personnel may include the principal and assistant principal, guidance counsellor, psychologist, educational specialists (speech, language arts, work-experience co-ordinators),

teacher aides, student aides, peer models, and others.

2. Professional personnel associated with programs may include:

- a. Public Health nurses (district public health offices), who provide developmental screening, nutrition, information, and parent counselling,
- b. speech therapists in a Public Health unit, school board, or hospitals such as:  
Alberta Children's Hospital  
1820 Richmond Road S.W.,  
Calgary, Alberta, Phone: 245-7211  
Glenrose Hospital, 10230 - 111 Avenue,  
Edmonton, Alberta, Phone: 471-2662
- c. nutritionists (Alberta Agriculture district offices), who provide diet counselling, child-parent programs,
- d. Mental Health workers (Alberta Mental Health district offices), who provide support services, counselling,
- e. social workers (Alberta Social Service and Community Health district offices), who provide family support, relief services,
- f. community recreation programmers, Y.M.C.A., Y.W.C.A., school boards, and church groups offering recreation programs,
- g. psychologists (school boards, private practitioners, universities, psychology departments of hospitals), who provide testing,
- h. occupational therapists/physiotherapists (school systems, Alberta Children's Hospital, Calgary, and the Glenrose Hospital, Edmonton),
- i. Alberta Education Consultants in the following locations, for program advice and help:  
Calgary Regional Office, #1200  
615 Macleod Trail S.E., T2G 4T8,  
Phone: 261-6353  
Edmonton Regional Office, 3rd Floor,  
Edwards Bldg., 10053 - 111 St., T5K 2H8,  
Phone: 427-2952  
Lethbridge Regional Office, Prov. Bldg.  
200 - 5 Avenue South, T1J 4C7,  
Phone: 329-5243  
Red Deer Regional Office, 3rd Floor West,  
Prov. Bldg., 4920 - 51 St., T4N 5Y5,  
Phone: 343-5262  
Grande Prairie Regional Office,  
10014 - 99 St., T8V 3N4, Phone: 539-2130.

3. Community volunteers and organizations may offer assistance in such areas as speech, language, reading, swimming, field-trip supervision, and arts and crafts for in-school and out-of-school programs.

## PREVIEWING QUESTIONS

These questions are designed to allow the participants to explore their feelings toward EMH students. For maximum benefit, it is suggested that participants discuss one or more questions in small group settings, then share their ideas in the larger group.

1. Your husband or wife is constantly nagging you about overspending the budget, or about some other household responsibility with which you have difficulty, e.g., cooking, housecleaning. Relate these feelings to how an EMH person would feel regarding most of life's activities and endeavors.
2. Your son brings a friend home after school. You find out that this friend is in a special class. How do you feel about this?
3. Your principal has asked you to take several EMH students into your remedial math class. How do you react to this?
4. Think about a relative or friend who is "slow-to-catch-on-to-things." In what ways are you similar to/different from that person?
5. You enjoy your job very much. Sometimes you are slow and are teased by your fellow workers. How do you feel about this?

## PREVIEWING ACTIVITIES

These activities are intended to allow participants to become aware of what mental handicaps are like, the problems encountered by EMH persons, and how to overcome these problems.

To facilitate the effectiveness of these simulations, it is necessary that the workshop leader be familiar with the activities beforehand. In addition, participants should be organized into small groups and rotated through each of the four activities.

### 1. Killer Phrases

All children require emotional support to grow into secure, independent adults. EMH students often experience greater amounts of failure than their peers. They feel frustrated and often have an anticipation of failure. The following simulation will give participants an opportunity to understand what it is like to have some of these feelings.

**Materials required:** Handout # 1 (Killer Phrases); paper and pencils; red marking pen.

**Activity:** Have each group of participants select a leader. The leader gives the following instructions: "Write a poem about something special you have done. You have three minutes in which to complete the exercise. Do your very best, and make it as neat as possible."

When the time is up, the leader asks participants to read their poems in turn. While they read them aloud, the leader makes negative comments about content, voice, clarity, posture, technical merit (rhymed or not), spelling mistakes, lack of originality, etc. Handout #1 (Killer Phrases) can be used for reference.

**Invite participants to discuss the following:**

How did you feel as you read the poem?

How could you overcome this problem?

Would changing the role of the leader make the exercise easier?

Now have participants pair off and make one or two positive comments about each other's poem.

### 2. Is This What I See?

Many of us take for granted the things we see and react to everyday. The EMH student, however, has difficulty with both observation skills and learning the less obvious (incidental) details of our environment.

**Materials required:** paper, pencils.

**Activity:** Have participants describe one of the following (without checking back for any details):

- a. directions to get to the nearest pay telephone they passed on their way to the group meeting;
- b. the physical appearance (clothing, etc) of the first person they met at the workshop;
- c. the entrance way to the building in which you are meeting.

**Invite participants to discuss the following:**

How did you feel after the activity?

In what ways could you improve your observation skills?

### 3. Learning To Read Takes Time

Many EMH students have difficulty learning to read. They are capable of doing so, although this learning process may take considerably more time when compared with that of their peers. This simulation will give participants the experience of learning something difficult, something that takes considerable time to learn.

**Materials required:** paper and pencils; Handout #2 (Medical Words).

## HANDOUT 1

# KILLER PHRASES

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### CONTENT OF POEM

It would be much better...  
Don't you mean...?  
Substitute...  
Wrong word.  
Out of context.  
Too long a sentence.  
Can't you vary the...?  
Doesn't rhyme!  
Start again!  
Couldn't you have tried harder by...?  
Not very original.  
Where have I heard that before?  
Come on!  
Not exactly up to age/grade expectations.  
What was the title again?

### PRESENTATION

Speak up!  
I can't understand you.  
Stop mumbling/stuttering, etc.  
Can't you stand up straight?  
Focus your eyes on the paper.  
Speed up! Slow down!  
Turn around.

### MORE KILLER PHRASES

Put more expression into it.  
Have you got ants in your pants?  
You can do better than that—try again!  
I've heard better.  
This is effort?  
Rewrite it!



## HANDOUT 2

# MEDICAL WORDS

**Convolution** (Kǒn'-vō-loo-shŭn). A turn, fold, or coil of anything that is convoluted.

**Coretomedialysis** (Kōr'-ēt-ō-mē-dī-āl-ī-sīs). The making of an artificial pupil through the iris.

**Electrocautery** (Ē-lĕk'-trō-kaw-tĕr-i). Cauterization by means of an apparatus consisting of a holder containing wire, which is heated by electricity.

**Granulopoiesis** (Grăn-úlo-poy-e-sis). The formation of granulocytes.

**Hyalenchondroma** (Hī-ă-lō-ĕn-kǒn-drōmă). A chondroma composed of hyaline cartilage.

**Lochiorrhea** (Lō-kī-ō-rĕă). A discharge following childbirth.

**Myocelialgia** (Mī-ō-sē-ĭ-al-jī-ă). Abdominal muscle pain.

**Periamygdalitis** (Pĕr-ī-ăm-ĭg-dăl-ī-tīs). Inflammation of connective tissue around the tonsil.

**Suggilation** (Sŭg-jīl-ă-shŭn). A bruise or black-and-blue mark.

**Ulogossitis** (U-lō-glos-ī-tīs). Inflammation of the gums and tongue.

Source: **Tabers Cyclopedic Medical Dictionary**, F.A. Davis Co., Philadelphia, 1977.

**Activity:** When participants have assembled into small groups, give them a spelling test using the words on Handout #2. Have them correct their spelling using the Handout.

**An alternative activity:** Duplicate the words in Handout #2 and distribute these to each participant. Then have them write the definitions of the words.

**Invite participants to discuss the following:**

How did you feel after the activity?

How could learning have been enhanced?

#### 4. My Fingers Won't Work

Many EMH students have poor eye-hand co-ordination and fine-motor skills. They know exactly what they want to write, but cannot always manage the correct writing movements.

**Materials required:** mirrors; paper and pencils.

**Activity:** Ask participants to draw a picture. Have them repeat the process holding the pencil in the mouth. How do the two pictures compare?

**An alternative activity:** Ask participants to use the non-dominant hand to write their name and address. Then instruct them to use a mirror to guide their hand when copying a design.

**Invite participants to discuss the following:**

How did you feel when you compared the two pictures?

How could some of these problems be overcome?

## POST-VIEWING QUESTIONS

These questions are designed to reinforce the goals of this unit. The questions can be directed either to the total audience or to small groups.

1. What do Michael and Sherry have in common with their peers?
2. Describe how integration is mutually beneficial for the EMH student and the general school/community population.
3. Many times, the EMH child's handicap goes undetected until school failure. What placement considerations should be made when programming for this student?
4. Your daughter is educable mentally handicapped. Describe a teaching technique you could use to enable her to be more independent in the community.

5. Detail the major steps to be undertaken before integrating an EMH student in a regular classroom.

## POST-VIEWING ACTIVITIES

The following activities are intended to give participants practical suggestions on how to experience success when working with EMH students. It is recommended that these activities be carried out in small groups, with reports made later to all participants.

### 1. Self-Concept

A positive self-concept is necessary for all children to grow into healthy, independent adults. EMH students often have repeated failure experiences that lead to anticipation of failure. This simulation is intended to give participants a starting point on which to build further self-concept-related success experiences.

**Materials required:** glue; scissors; picture magazines; 8 1/2" X 11" manilla tags; felt pens.

**Activity:** Distribute the materials and give participants the following instruction: "Make a collage of a special experience in your life." Allow 20 minutes for the activity. After they have completed the activity, ask participants to describe their collage.

**An alternative activity:** "Make a collage of yourself or of a special feeling—e.g., anger, joy—or of your anticipated later life."

**Invite participants to discuss the following:**

What feelings did you have after the activity?

How could the activity relate to co-operating with others?

### 2. Task Analysis

EMH students often require much more structure when learning a task. By using a method of breaking tasks down into smaller components, these students can experience success while learning a new task. (For this activity, participants must make some assumption of student prerequisite skills.)

**Materials required:** paper and pencils; task card 1 (one per group) on page 12; Handout #3 (Task Analysis).

**Activity:** Distribute materials to the group. Instruct participants to read the task cards and fill out Handout #3. Have participants share their responses with the entire group.

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## HANDOUT 3: **TASK ANALYSIS**

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Key steps (in order that they would naturally appear)	Materials/equipment	(optional) visual presentation (to assist Key steps) e.g., pictures of progression.
<div>1.</div> <div>2.</div> <div>3.</div> <div>4.</div> <div>5.</div> <div>6.</div> <div>7.</div> <div>8.</div> <div>9.</div> <div>10.</div>		

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## TASK CARD 1

Learning to write the letters of the alphabet (Select one or two letters of the alphabet.)

Running an errand to the store to make a small purchase

Hitting a baseball (with a bat)

Simple column addition

Watering plants

Making a cup of instant coffee

### Invite participants to discuss the following:

How did you feel about the activity?

Would students find this task-analysis skill beneficial in analyzing everyday life experiences? If so, how?

### 3. Following Instructions

Many EHM students have difficulty following instructions. This is especially true if too many instructions are given at one time. Often they will get lost after the first, e.g., "When you have completed your math homework, make your lunch; remember to select items for a balanced diet; then you can put your laundry away and bathe, and wash your hair."

**Materials required:** paper and pencils.

**Activity:** Ask participants to select several instructions (school- or community-based) they wish an EMH student to follow. Have them list considerations or points to keep in mind when having an EMH student follow instructions, e.g., making sure the directions are understood.

### Invite participants to discuss the following:

How did you feel after the activity?

Could you use this technique with all EMH children? If so, how?

### 4. Interpersonal Relations

The EMH student often has difficulty solving interpersonal problems with his/her peers since interests correspond more closely with that of younger children. Often this student needs instruction on how to relate appropriately, express emotions, make social judgments, and solve problems.

**Materials required:** paper and pencils; task card 2 below (one per group).

**Activity:** Distribute materials to participants. Have them brainstorm one activity related to the task card to use with students. Have participants share their activity with the entire audience.

### Invite participants to discuss the following:

How did you feel about the activity?

In what other ways could interpersonal relations be improved?

## TASK CARD 2

Age appropriateness. Devise an activity to foster positive emotions/feelings about oneself.

Expressing emotions. Devise an activity to foster the expression of positive emotions/feelings about oneself.

Expressing emotions. Devise an activity to foster the expression of positive emotions/feelings about another person.

Being assertive. Devise an activity to foster assertiveness in a positive rather than a destructive manner.

Social judgment. Devise an activity to foster awareness of proper social judgment in a specific situation.

## GLOSSARY

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**articulation.** The utterance of speech sounds caused by movements of the organs of speech.

**distractibility.** Being drawn or diverted from something needing attention; confusion of mind.

**eye-hand co-ordination.** The process of synchronizing vision with the movements of the body or body parts in order to carry out a task.

**fine-motor skills.** The skills requiring sophisticated use of physical or motor ability, e.g., drawing figures, writing.

**generalizing ability.** The ability to synthesize new data into already existing schema.

**hyperactivity.** A pattern of muscular activities characterized by excessive mobility and severe restlessness caused by psychiatric disorders and/or organic changes.

**imitation.** The act of behaving or attempting to behave in the same way as a model.

**incidental learning.** Learning that occurs by chance, without intention or calculation by the teacher or learner.

**interpersonal skills.** The skills one needs to communicate and interact effectively with other people.

**learning disabilities.** Behavior displayed by children who do not benefit from the classroom instruction that aids most children, although they possess an average or above average intelligence and manifest no evident physical, emotional, or cultural handicaps.

**mental age.** A measure of performance on an achievement test, expressed as an empirically determined average age for the same performance.

**motor co-ordination.** The ability to co-ordinate, or combine together, in smooth manner, muscular movements.

**occupational therapist.** Person qualified to aid in the rehabilitation of others by means of creative activity.

**perceptual disorders.** A disarrangement of, or confusion in, the ability to perceive or discriminate.

**physiotherapist.** Person qualified to improve a patient's strength and control of motor functions through neuromuscular activity and exercise.

**psychologist.** Person who is trained in methods of psychological analysis, therapy, and research.

**self-concept.** An individual's perception of self and role in a specific situation at a specific time.

**transfer skills.** The ability to use previously learned knowledge and relate it to new situations.

**uninhibited.** Behavior displaying the absence of inhibitions, restraints, or prohibitions.

## REFERENCES FOR WORKSHOP LEADERS AND TEACHERS

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### 1. Acceptance of the Handicapped

Bookbinder, Susan R. *Mainstreaming*. Boston, Mass.: The Exceptional Parent Press, 1978.

A program for educating children and adults alike about disabilities, with emphasis on the acceptance of differences. Suggests activities and resource aids for the implementation of such a program.

Cohen, Shirley, et al. *Accepting Individual Differences*. Niles, Ill.: Developmental Learning Materials, 1977.

This kit includes five booklets and four large picture books. The booklets contain basic concepts and student activities to match each picture book.

P.A.T.H. (*Positive Attitudes Toward the Handicapped*). Calgary, Alta.: Regional Resource Service, Alberta Education, 1978.

This kit contains various materials that encourage a more positive attitude toward, and understanding of, handicapped people. Includes simulation activities and reference materials. (Available from Alberta Education, Calgary Regional Office).

Ravosa, Carmino, C., et al. *Put On A Handicap*. Long Branch, N.J.: Kimbo Educational, 1979 (record).

An aid in preparing a class for mainstreaming. It gives children the opportunity to experience handicapping conditions by simulation and role-playing.

Ward, Michael J., *et al.* *Everybody Counts! A Workshop Manual to Increase Awareness of Handicapped People*. Reston, Va.: Council for Exceptional Children, 1979.

A booklet and corresponding tape designed to help people better understand the struggles, frustrations, and triumphs of the handicapped in today's society.

## 2. Self-Concept

Ball, Geraldine, and Palomares, Uvaldo. *Magic Circle*. La Mesa, Calif.: Human Development Training Institute, 1974.

This book provides effective educational experience for students. It gives them opportunities to become involved in developing their own personal effectiveness, self-confidence, and understanding of the dynamics of interpersonal relationships.

Creative Teaching Press Inc. *Rainbow Activities: 50 Multi-Cultural/Human Relations Experiences*. South El Monte, Calif.: 1977.

The book's activities emphasize appreciation of heritage, an alternative method of approaching multi-ethnic education—Rainbow philosophy: "The beauty of differences and the differences of beauty." Human-relations, skill-building exercises are divided into four categories: cultural pluralism; self-image; values; and feelings.

Glasser, W. *Schools Without Failure*. New York, N.Y.: Harper and Row, Publishers, 1969.

Dr. Glasser's theories of Reality Therapy are applied to contemporary education. The book details the shortcomings of current education and proposes a new program to reduce school failure based on increased involvement, relevance, and thinking as opposed to mere memory drill. Also covered in detail are new approaches to heterogeneous classes, testing, homework, and student classification.

Goldstein, Herbert. *Social Learning Curriculum*. Weston, Ontario: Charles E. Merrill Publishing Inc., 1974.

A curriculum based on Gestalt principles, this kit is a comprehensive course of study for exceptional students. It is divided into ten areas of social learning, each containing a book of student activities, teaching strategies and lesson plans, a spirit-duplicating book of worksheets and games, and stimulus pictures for each lesson book. Aspects of the curriculum include: perceiving individuality; recognizing the body; understanding emotions;

what the senses do; communicating with others; getting along with others; identifying helpers; and maintaining body functions.

The kit also has a teacher's guide, a book of supplementary science activities, a book of physical-education activities, and a mathematics supplementary workbook. Includes a scope-and-sequence chart for the entire curriculum.

Thomas, Marlo. *Free To Be...You and Me*. Toronto: Free To Be Foundation Inc., 1974.

A children's song, poetry, and story book with a refreshing approach to gaining objectives that range from expanding a child's personal horizons to challenging stereotypes and age-old myths. Deals with many realistic situations such as divorce and sibling rivalry.

## 3. General References

Anderson, Daniel R., *et al.* *Instructional Programming for the Handicapped Student*. Springfield, Ill.: Charles C. Thomas, 1975.

A manual outlining training procedures for a wide variety of tasks including dressing, cleanliness, eating, motor skills, and other matters. Behavior-modification techniques are emphasized, including a discussion of techniques for graphing and recording behavior and implementing modification techniques. Each section outlines objectives and basic procedures. Also included is an annotated bibliography of references to commercially available journals and instructional programs and textbooks.

*Educable Mentally Handicapped Curriculum Guide*. Calgary, Alta.: Alberta Education, 1982.

The *Guide* has three sections: Living/Vocational Skills; Computation Skills; and Communication Skills. It contains objectives, strategies, and materials.

Feldman, Stephen J., *et al.* *Readings In Teaching the Educable Mentally Handicapped*. Guilford, Conn.: Special Learning Corp., 1980.

The articles in this book reflect many aspects of EMH individuals and incorporates the latest training methods, educational philosophy, and social planning.

Humphrey, James H., *et al.* *Teaching Slow Learners Through Active Games*. Springfield, Ill.: Charles C. Thomas, 1970.

The book discusses the various types of slow learners, the theory of active games learning, research, and factors influencing learning



through active games. It also contains about two hundred examples of games suitable for use in learning skills and concepts in the area of reading, plus elementary-school mathematics and science.

Kolstoe, Oliver P. *Teaching Educable Mentally Retarded Children*. Toronto, Ontario: Holt, Rinehart and Winston, 1976.

This book tries to combine all the diverse goals and teaching methods into one, usable framework. It ties methods and materials to specific behavioral skills for work and independent living.

National Education Association of the United States. *The Educable Mentally Retarded Student in the Secondary School*. Washington, D.C.: 1975.

This report is based on research in the area of special education and aims to help teachers learn more about the topic and its relevance to their professional responsibility. The book discusses retarded students, how we view them, how they learn, how their needs can be met, and provides additional readings and references.

Weber, Kenneth. *Yes, They Can! A Practical Guide for Teaching the Adolescent Slow Learner*. Toronto, Ontario: Methuen Publications, 1974.

A guide for teachers that offers programs utilizing think-tank assignments, brainstorming sessions, group encounters, cartoons, puzzles, and relevant questions to stimulate interest in reading and writing, comprehension, and perception in the adolescent slow learner. It outlines methods that are both realistic and inexpensive, yet develops skills and nurtures self-confidence in this type of student.

## GETTING THE MOST FROM A VIDEO PRESENTATION

An educational television program can be an effective and stimulating learning resource. Because of its ability to convey information and meaning through scenes and sounds, television is one of the most effective classroom tools at your disposal. In addition, support materials are available for a number of ACCESS NETWORK programs. Many of these materials—which include student teacher guides and manuals, slides, transparencies, filmstrips, posters, etc.—contain suggestions for previewing and post-viewing activities.

Many teachers have found that the effectiveness of video programming can be enhanced in the following ways:

1. Use the **stop** and **pause** buttons frequently to highlight program segments. This will help break the passive viewing habit created in students by commercial TV and focus their attention on your purpose for showing the program(s).
2. Use the **counter** to prepare for the viewing session. Set it to zero at the start of a program. This will help pinpoint the location of segments to be reviewed later. You can then create a **log** by jotting down the counter numbers that correspond to important segments.
3. Be specific about viewing objectives **before** showing the program. Students will be able to focus their attention better if they are aware of what to look for in a videotape. Prepare a list of guideline questions on the blackboard or on photocopied handouts. (Be sure to cover all of the questions in post-viewing activity.)
4. Since educational television programs generally include more material than can be digested in a single viewing, show the program in its entirety once and then, after clarifying vocabulary difficulties and reviewing specific learning objectives, show selected portions a second, even a third, time. Again, the stop and pause buttons can be used to allow students to take notes—or focus attention on a particular item of importance.
5. Television programs consist of **both** audio and video signals, and viewers often need to be stimulated in order to derive maximum information from both. During the second viewing of a program segment, you can stimulate the development of viewing and listening skills by showing the picture but turning off the sound and asking for recall of audio information. Alternatively, leave the sound on but eliminate the picture.
6. Both for viewing comfort and for note-taking convenience, TV should not be viewed in a dark room. However, light can also be a problem, so the television set should be located to avoid window reflection on the screen. To eliminate ceiling-light reflection, tilt the set forward slightly.
7. Ensure that all students have a clear line of sight to the set. If necessary, alter seating arrangements to give every student a satisfactory view of the screen.
8. Adjust the controls of the TV set to ensure good color balance, adequate brightness, and contrast.
9. In some cases, it is useful to have tapes and equipment available for independent viewing by individual students.





